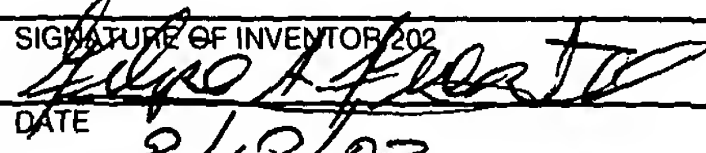
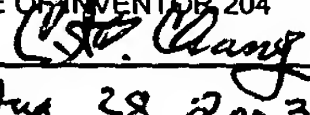
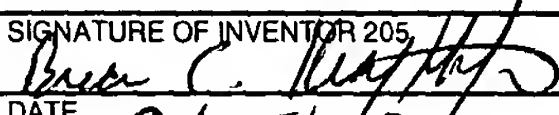


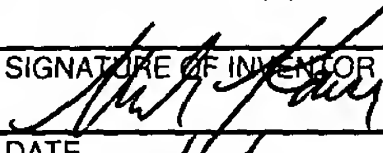
COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY <small>(Includes Reference to PCT International Applications)</small>	Attorney's Docket Number H0004293	U.S. Application No. (if known)																																				
<p>As a below named inventor, I hereby declare that:</p> <p>My residence, post office address and citizenship are as stated below next to my name,</p> <p>I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:</p> <p style="text-align: center;">CABIN AIR QUALITY SYSTEM</p> <p>the specification of which</p> <p><input checked="" type="checkbox"/> is attached hereto</p> <p style="text-align: center;">OR</p> <p><input type="checkbox"/> was filed as United States Application Number or PCT International Application Number</p> <p>_____</p> <p>on _____</p> <p>and was amended</p> <p>on _____ (if applicable)</p> <p>I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.</p> <p>I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56.</p> <p>I hereby claim the benefit under Title 35, United States, §119 (e) of any United States provisional application(s) listed below.</p> <table><tr><td>_____ (Application Number)</td><td>_____ (Filing Date)</td></tr><tr><td>_____ (Application Number)</td><td>_____ (Filing Date)</td></tr></table> <p>I hereby claim foreign priority benefits under Title 35, United States Code, §119 (a)-(d) or §365 of any foreign application(s) for patent or inventor's certificate or §365 (a) of any PCT international application(s) which designated at least one country other than the United States of America, listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) having a filing date before that of the application(s) of which priority is claimed:</p> <table border="1"><thead><tr><th colspan="4">PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:</th></tr><tr><th>COUNTRY (if PCT, indicate "PCT")</th><th>APPLICATION NUMBER</th><th>DATE OF FILING (day, month, year)</th><th>PRIORITY CLAIMED UNDER 35 USC 119</th></tr></thead><tbody><tr><td></td><td></td><td></td><td><input type="checkbox"/> YES <input type="checkbox"/> NO</td></tr><tr><td></td><td></td><td></td><td><input type="checkbox"/> YES <input type="checkbox"/> NO</td></tr><tr><td></td><td></td><td></td><td><input type="checkbox"/> YES <input type="checkbox"/> NO</td></tr><tr><td></td><td></td><td></td><td><input type="checkbox"/> YES <input type="checkbox"/> NO</td></tr><tr><td></td><td></td><td></td><td><input type="checkbox"/> YES <input type="checkbox"/> NO</td></tr><tr><td></td><td></td><td></td><td><input type="checkbox"/> YES <input type="checkbox"/> NO</td></tr></tbody></table>			_____ (Application Number)	_____ (Filing Date)	_____ (Application Number)	_____ (Filing Date)	PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:				COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119				<input type="checkbox"/> YES <input type="checkbox"/> NO				<input type="checkbox"/> YES <input type="checkbox"/> NO				<input type="checkbox"/> YES <input type="checkbox"/> NO				<input type="checkbox"/> YES <input type="checkbox"/> NO				<input type="checkbox"/> YES <input type="checkbox"/> NO				<input type="checkbox"/> YES <input type="checkbox"/> NO
_____ (Application Number)	_____ (Filing Date)																																					
_____ (Application Number)	_____ (Filing Date)																																					
PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:																																						
COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119																																			
			<input type="checkbox"/> YES <input type="checkbox"/> NO																																			
			<input type="checkbox"/> YES <input type="checkbox"/> NO																																			
			<input type="checkbox"/> YES <input type="checkbox"/> NO																																			
			<input type="checkbox"/> YES <input type="checkbox"/> NO																																			
			<input type="checkbox"/> YES <input type="checkbox"/> NO																																			
			<input type="checkbox"/> YES <input type="checkbox"/> NO																																			

Combined Declaration For Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)				Attorney's Docket Number H0004293	
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or §365 of any PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56 which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:					
PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:					
U.S. APPLICATIONS				STATUS (Check one)	
U.S. APPLICATION NUMBER	U.S. FILING DATE		PATENTED	PENDING	ABANDONED
PCT APPLICATIONS DESIGNATING THE U.S.					
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)			
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number); Robert Desmond, Reg. No. 38,430; Larry Palguta, Reg. No. 29,575; Keith A. Newbury, Reg. No. 38,980; Roger H. Criss, Reg. No. 25,570; William J. Zak, Jr., Reg. No. 38,668; and Oral Caglar, Reg. No. 44,577, all attorneys with Honeywell International Inc., Law Dept. AB2, P.O. Box 2245, Morristown, NJ 07962-9806 and Michael A. Shimokaji, Reg. No. 32,303 and each principal, attorney of counsel, associate and employee of DiPinto & Shimokaji, P.C., who is a registered Patent Attorney or Agent, including Jerry Haynes, Reg. No. 42,646; David J. Robeson, Reg. No. 38,598; James F. Harvey, Reg. No. 39,706; Lyman Smith, Reg. No. 44,342; Mark Manley, Reg. 36,592; James H. Fritz, Reg. No. 28,077; Charles Gumpel, Reg. No. 29,385; Douglas E. Mackenzie, Reg. No. 38,955; Michael Shmilovich, Reg. No. 45,634; Richard D. Fuerle, Reg. No. 24,640; Kirk Hahn, Reg. No. 51,763; and Frederic Douglas, Reg. No. 48,813.					
Send Correspondence to: Honeywell International, Inc. Law Dept. AB2 P.O. Box 2245 Morristown, NJ 07962-9806				Direct Telephone Calls to: (name and telephone number) Oral Caglar (310) 512-4886	
2 0 1	FULL NAME OF INVENTOR	FAMILY NAME Yates	FIRST GIVEN NAME Stephen	SECOND GIVEN NAME F.	
	RESIDENCE & CITIZENSHIP	CITY Arlington Heights	STATE OR FOREIGN COUNTRY IL	COUNTRY OF CITIZENSHIP USA	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 1539 S. Kennicott Drive	CITY Arlington Heights	STATE & ZIP CODE/COUNTRY IL 60005	
2 0 2	FULL NAME OF INVENTOR	FAMILY NAME Fuentes	FIRST GIVEN NAME Felipe	SECOND GIVEN NAME A.	
	RESIDENCE & CITIZENSHIP	CITY Harbor City	STATE OR FOREIGN COUNTRY CA	COUNTRY OF CITIZENSHIP USA	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 1501 Rutgers Place	CITY Harbor City	STATE & ZIP CODE/COUNTRY CA 90710	
2 0 3	FULL NAME OF INVENTOR	FAMILY NAME Michalakos	FIRST GIVEN NAME Peter	SECOND GIVEN NAME M.	
	RESIDENCE & CITIZENSHIP	CITY Chicago	STATE OR FOREIGN COUNTRY IL	COUNTRY OF CITIZENSHIP USA	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 5555 N. Cumberland Ave., #313	CITY Chicago	STATE & ZIP CODE/COUNTRY IL 60656	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.					
SIGNATURE OF INVENTOR 201		SIGNATURE OF INVENTOR 202		SIGNATURE OF INVENTOR 203	
DATE		DATE		DATE	

Combined Declaration For Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)				Attorney's Docket Number H0004293	
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or §365 of any PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56 which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:					
PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:					
U.S. APPLICATIONS				STATUS (Check one)	
U.S. APPLICATION NUMBER	U.S. FILING DATE		PATENTED	PENDING	ABANDONED
PCT APPLICATIONS DESIGNATING THE U.S.					
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)			
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number); Robert Desmond, Reg. No. 38,430; Larry Palguta, Reg. No. 29,575; Keith A. Newbury, Reg. No. 38,980; Roger H. Criss, Reg. No. 25,570; William J. Zak, Jr., Reg. No. 38,668; and Oral Caglar, Reg. No. 44,577, all attorneys with Honeywell International Inc., Law Dept. AB2, P.O. Box 2245, Morristown, NJ 07962-9806 and Michael A. Shimokaji, Reg. No. 32,303 and each principal, attorney of counsel, associate and employee of DiPinto & Shimokaji, P.C., who is a registered Patent Attorney or Agent, including Jerry Haynes, Reg. No. 42,646; David J. Robeson, Reg. No. 38,598; James F. Harvey, Reg. No. 39,706; Lyman Smith, Reg. No. 44,342; Mark Manley, Reg. No. 36,592; James H. Fritz, Reg. No. 28,077; Charles Gumpel, Reg. No. 29,385; Douglas E. Mackenzie, Reg. No. 38,955; Michael Shmilovich, Reg. No. 45,634; Richard D. Fuerle, Reg. No. 24,640; Kirk Hahn, Reg. No. 51,763; and Frederic Douglas, Reg. No. 48,813.					
Send Correspondence to: Honeywell International, Inc. Law Dept. AB2 P.O. Box 2245 Morristown, NJ 07962-9806				Direct Telephone Calls to: (name and telephone number) Oral Caglar (310) 512-4886	
2 0 1	FULL NAME OF INVENTOR	FAMILY NAME Yates	FIRST GIVEN NAME Stephen	SECOND GIVEN NAME F.	
	RESIDENCE & CITIZENSHIP	CITY Arlington Heights	STATE OR FOREIGN COUNTRY IL	COUNTRY OF CITIZENSHIP USA	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 1539 S. Kennicott Drive	CITY Arlington Heights	STATE & ZIP CODE/COUNTRY IL 60005	
2 0 2	FULL NAME OF INVENTOR	FAMILY NAME Fuentes	FIRST GIVEN NAME Felipe	SECOND GIVEN NAME A.	
	RESIDENCE & CITIZENSHIP	CITY Harbor City	STATE OR FOREIGN COUNTRY CA	COUNTRY OF CITIZENSHIP USA	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 1501 Rutgers Place	CITY Harbor City	STATE & ZIP CODE/COUNTRY CA 90710	
2 0 3	FULL NAME OF INVENTOR	FAMILY NAME Michalakos	FIRST GIVEN NAME Peter	SECOND GIVEN NAME M.	
	RESIDENCE & CITIZENSHIP	CITY Chicago	STATE OR FOREIGN COUNTRY IL	COUNTRY OF CITIZENSHIP USA	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 5555 N. Cumberland Ave., #313	CITY Chicago	STATE & ZIP CODE/COUNTRY IL 60656	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.					
SIGNATURE OF INVENTOR 201		SIGNATURE OF INVENTOR 202 		SIGNATURE OF INVENTOR 203	
DATE		DATE 8/18/03		DATE	

Combined Declaration For Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)				Attorney's Docket Number H0004293	
204	FULL NAME OF INVENTOR	FAMILY NAME Chang	FIRST GIVEN NAME Chin	SECOND GIVEN NAME H.	
	RESIDENCE & CITIZENSHIP	CITY Palatine	STATE OR FOREIGN COUNTRY IL	COUNTRY OF CITIZENSHIP USA	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 511 Revere Lane	CITY Palatine	STATE & ZIP CODE/COUNTRY IL 60067	
205	FULL NAME OF INVENTOR	FAMILY NAME Krafthefer	FIRST GIVEN NAME Brian	SECOND GIVEN NAME C.	
	RESIDENCE & CITIZENSHIP	CITY Stillwater	STATE OR FOREIGN COUNTRY MN	COUNTRY OF CITIZENSHIP USA	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 1400 Norcrest Ave. N	CITY Stillwater	STATE & ZIP CODE/COUNTRY MN 55082	
206	FULL NAME OF INVENTOR	FAMILY NAME Kaiser	FIRST GIVEN NAME Mark	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY Arlington Heights	STATE OR FOREIGN COUNTRY Illinois	COUNTRY OF CITIZENSHIP USA	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 323 S. Phelps Avenue	CITY Arlington Heights	STATE & ZIP CODE/COUNTRY Illinois, 60004	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.					
SIGNATURE OF INVENTOR 204		SIGNATURE OF INVENTOR 205		SIGNATURE OF INVENTOR 206	
 DATE Aug. 28, 2003		DATE		DATE	

Combined Declaration For Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)				Attorney's Docket Number H0004293	
2 0 4	FULL NAME OF INVENTOR	FAMILY NAME Chang	FIRST GIVEN NAME Chin	SECOND GIVEN NAME H.	
	RESIDENCE & CITIZENSHIP	CITY Palatine	STATE OR FOREIGN COUNTRY IL	COUNTRY OF CITIZENSHIP USA	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 511 Revere Lane	CITY Palatine	STATE & ZIP CODE/COUNTRY IL 60067	
2 0 5	FULL NAME OF INVENTOR	FAMILY NAME Krafthefer	FIRST GIVEN NAME Brian	SECOND GIVEN NAME C.	
	RESIDENCE & CITIZENSHIP	CITY Stillwater	STATE OR FOREIGN COUNTRY MN	COUNTRY OF CITIZENSHIP USA	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 1400 Norcrest Ave. N	CITY Stillwater	STATE & ZIP CODE/COUNTRY MN 55082	
2 0 6	FULL NAME OF INVENTOR	FAMILY NAME Kaiser	FIRST GIVEN NAME Mark	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY Arlington Heights	STATE OR FOREIGN COUNTRY Illinois	COUNTRY OF CITIZENSHIP USA	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 323 S. Phelps Avenue	CITY Arlington Heights	STATE & ZIP CODE/COUNTRY Illinois, 60004	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.					
SIGNATURE OF INVENTOR 204		SIGNATURE OF INVENTOR 205 		SIGNATURE OF INVENTOR 206	
DATE		DATE 8/05/03		DATE	

Combined Declaration For Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)				Attorney's Docket Number H0004293	
2 0 4	FULL NAME OF INVENTOR	FAMILY NAME Chang	FIRST GIVEN NAME Chin	SECOND GIVEN NAME H.	
	RESIDENCE & CITIZENSHIP	CITY Palatine	STATE OR FOREIGN COUNTRY IL	COUNTRY OF CITIZENSHIP USA	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 511 Revere Lane	CITY Palatine	STATE & ZIP CODE/COUNTRY IL 60067	
2 0 5	FULL NAME OF INVENTOR	FAMILY NAME Krafthefer	FIRST GIVEN NAME Brian	SECOND GIVEN NAME C.	
	RESIDENCE & CITIZENSHIP	CITY Stillwater	STATE OR FOREIGN COUNTRY MN	COUNTRY OF CITIZENSHIP USA	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 1400 Norcrest Ave. N	CITY Stillwater	STATE & ZIP CODE/COUNTRY MN 55082	
2 0 6	FULL NAME OF INVENTOR	FAMILY NAME Kaiser	FIRST GIVEN NAME Mark	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY Arlington Heights	STATE OR FOREIGN COUNTRY Illinois	COUNTRY OF CITIZENSHIP USA	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 323 S. Phelps Avenue	CITY Arlington Heights	STATE & ZIP CODE/COUNTRY Illinois, 60004	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.					
SIGNATURE OF INVENTOR 204		SIGNATURE OF INVENTOR 205		SIGNATURE OF INVENTOR 206 	
DATE		DATE		DATE 8/5/03	